

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P. E. CLASSIFIER		8	01/19/01
FORMALITY REVIEW	HA	858	02-02-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		29	
2		11	
3		6	
4		02	
5		02	
6		03	
7		✓	
8		✓	
9		✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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